



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES

August 8, 2008

To: Contracted School District Superintendents
Medicaid Administrative Match Coordinators and
Billing Agents

From: Alan Himsl, Section Manager
Medicaid Outreach Section

RE: Medicaid Administrative Match Reporting Requirement – Funds for Local Match

This notification provides you with information regarding a Department of Social and Health Services (DSHS) Medicaid Administrative Match (MAM) federal program reporting requirement.

DSHS Administrative Policy 19.50.02 requires contractors to:

- Identify the type and source of funds used for local match; and
- Report local funds match information to DSHS annually

The Local Match Certification Form (DSHS 06-155) and Local Match Worksheet have been developed for entities to report the type and source of funds used for local match. Templates of these documents can be found at the following web link for your use: http://fortress.wa.gov/dshs/maa/mam/school/school_home.html

- Local Match Worksheet (with instructions); and
- DSHS Form – Local Match Certification, DSHS 06-155

Your school district must submit the Local Match Certification form and accompanying Local Match Worksheet annually along with the signed A19-1A Invoice Voucher for the final quarter of the contract's annual billing cycle. For school districts this is the A19-1A Invoice Voucher for the third quarter of the school year. The final quarter A19-1A Invoice Voucher will not be processed for payment prior to DSHS obtaining the Local Match Certification form and Worksheet.

Please be aware that your fiscal records and all required back-up documentation are subject to random audit by DSHS and by the federal Centers for Medicare and Medicaid Services.

If you have questions, please contact me at 360-725-1647, or by email at himslaj@dshs.wa.gov. Thank you for your attention in this matter.

cc: HRSA Fiscal Office
MaryAnne Lindeblad
Lenore Lawrence
Larry Linn